

SHREVEPORT, LOUISIANA

February 29, 2020



Chairmen: W. Britton Eaves, MD | Craig M. Walker, MD

MULTIDISCIPLINARY ADVANCEMENTS IN THE TREATMENT OF CARDIOVASCULAR DISEASE, PERIPHERAL ARTERY DISEASE AND ENDOVASCULAR THERAPY

Registration Form

All fields required for registration. Please print clearly.

Name (as it should appear on your badge)	Credential (MD, RN, etc.)	Position	
Specialty	Affiliation/Institution		
Street Address	City	State	Zip Code
E-Mail (only one email per person)	Phone (include extension)	Dietary Restrictions	

Payment Information

Payment by Check (Payable to: NCVH Foundation, a 501(c)(3) nonprofit organization. Tax ID# 46-3186713)

Payment by Credit Card: Visa MasterCard American Express Discover

Credit Card Number: _____ Exp. Date: _____ Security Code: _____

Cardholder Name: _____ Signature: _____

Register Today

Phone | 337.993.7920

Mail | NCVH Foundation

3639 Ambassador Caffery Pkwy, Suite 605
Lafayette, LA 70503

Online | ncvh.org/shreveport

Fax | 337.993.7922

Email | registration@ncvh.org

Registration Rates

\$25 | Early Bird | 11/1 - 2/24

\$50 | Onsite | 2/29



Meeting Location

Shreveport
Convention Center
400 Caddo Street
Shreveport, LA 71101
318.841.4000

Hotel Accommodations

Hilton Shreveport
104 Market Street
Shreveport, LA 71101
318.698.0900

Special Rates available on the Accommodations and Travel page at ncvh.org/shreveport

Cash, checks, and all major credit cards accepted.

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